

## IMMUNIZATION PROGRAM UPDATE

April 24/25 2007

LHJ Conference Call

### Implementation of HPV, Rotavirus and second dose varicella:

We are excited that the Washington State Legislature has included funding in the Department of Health vaccine budget to add HPV, Rotavirus and the second dose varicella to the universal childhood vaccine program. We will implement the new vaccines by allowing ordering to start May 1, 2007. Implementation will be based on the Advisory Committee on Immunization Practices (ACIP) recommended age groups, for children and adolescents up to the 19th birthday. The *Guidelines for the Use of State Supplied Vaccine* have been posted to the web-site at:

<http://www.doh.wa.gov/cfh/immunize/documents/vacusage.pdf>

In the new CDC funds management environment, Washington receives monthly allocations of vaccines. The Department of Health will be monitoring the demand for the new vaccines based on these allocations, and working with the CDC to make adjustments to Washington's monthly allocations for HPV and rotavirus vaccine. At this time, we are not creating county level allocations for these vaccines for LHJs to use in determining provider order amounts. We will inform you if our management strategy for these new vaccines changes.

Providers should assess the number of female adolescents they typically see in their practices in a given month, to determine how much HPV vaccine to order, and order accordingly. Vaccination should occur during the course of routine well child health visits for adolescent females. -

### Highlights of Changes in the Guidelines for the Use of State Supplied Vaccines (attached):

- HPV -- Guidelines are in alignment with ACIP & VAC recommendations, intervals are included.
- Rotavirus -- Guidelines are in alignment with the ACIP & VAC recommendations, -- intervals were also included here, plus the cautionary notes about starting and completing that series within specified time frames.
- MMR -- realigned with ACIP recommendations for the two dose series, the first dose is indicated at 12 - 15 months of age, or for anyone less than 19 who has not received the first dose (or is entering college and born after 1957); and for the second dose due at 4 -6 years, or for anyone less than 19 who has not received the second dose (or is entering college and born after 1957).
- Meningococcal Vaccine -- all cautionary language (including the high risk groups) has been removed from meningococcal vaccine.
- MMRV-- updated to allow use for second dose, now that second dose varicella will be allowed -- limiting to up to the 7th birthday when both MMR and Varicella are needed.
- Pediarix -- no changes.
- Hep A -- although we are continuing to support vaccination of high risk individuals, those are captured in the current language "all children 12 months up to the 19th birthday."
- The Guidelines have been realigned so the vaccines appear in this order; alphabetically, then seasonally -- influenza and pneumococcal polysaccharide vaccine typically have seasonal usage.

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### Policy and Programmatic Updates:

#### 2007 Legislative Session:

1. The legislature approved the Department of Health's budget request for new vaccines (HPV, rotavirus) and second dose of varicella. For the first time, approval was granted to implement new vaccines prior to the beginning of the new state fiscal year. Providers will be able to order HPV and rotavirus vaccines beginning May 1<sup>st</sup>, 2007. We are very pleased about the support the legislature and the Governor have shown regarding improving child health by promoting the prevention of vaccine preventable diseases, and supporting immunization for Washington children.
2. An HPV education bill was passed. It does not make HPV vaccination a requirement, but does require that public schools provide information about HPV and the vaccine to students at the beginning of the school year for students in 6<sup>th</sup> through 12<sup>th</sup> grades. Private schools are required to make the information available and notify parents that it is available. The requirement is effective beginning the 2007-2008 school year.
3. ESSB 5305 – mercury limits in vaccine, this bill limits the amount of thimerosal that can be contained in vaccines administered to children less than 3 years of age and pregnant women. The law becomes effective July 1, 2007. The law was open through amendment this year to define the circumstances under which the restriction could be lifted. The bill passed with amendments that allow state and local health officers to determine when a shortage or emergency situation requires the limits to be lifted. Additional amendments extended the populations that must be notified if the limits are lifted to include all children through 18 years of age, and women known to be lactating. There is still some lack of clarity with this amendment, and confusion that it extends notification to populations beyond those for whom the limitations are established in the law. The law was passed late in the session and we are aware that several providers and the Department of Health have written letters to express concern over these two issues.

### State Board of Health Update:

1. The State Board of Health (SBOH) is convening a technical advisory group (TAG) to consider a requirement for pneumococcal conjugate vaccine (PCV-7) for childcare entry. Last year, the SBOH developed criteria for determining requirements, and the TAG will use that work in the process of determining whether or not to make PCV-7 a requirement for childcare.
2. The school entry requirement structure includes two primary factors: (1) the listing of vaccine preventable diseases for which children must have protection (either via vaccination or natural immunity) and (2) a reference to the Recommended Immunization Schedule by date. The current school entry requirements reference the 2006 schedule. Over the next several months, the SBOH will be conducting work to up-date the reference to the 2007 schedule. When that occurs, the requirement for varicella vaccination will automatically be updated to include the two dose series. Department of Health will be working with SBOH on this effort, and will keep you apprised of its progress. The second dose requirement is not in effect for the 2007-2008 school year because the 2006 schedule currently referenced in the rule indicates only 1 dose is required for children less than 13 years of age.

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**Changes in School Requirements for School Year 2007-08**

- ◆ Hepatitis B: Kindergarten through Grade 10
- ◆ Varicella: Grades K, 1, and 6 (at this time, the requirement is based on the 2006 schedule, a single dose for children less than 13 years of age)
- ◆ MMR: 2 doses measles, mumps, and rubella--all grades
- ◆ Tdap: 1 dose for students in Grade 6 who are aged >11 years if it has been 5 years since the last Diphtheria/Tetanus-containing vaccine.

Implementation plans and other information related to Varicella, MMR and Tdap implementation have been developed and are available on our website: <http://www.doh.wa.gov/cfh/immunize/schools.htm>.

It is important to note that although HPV, Rotavirus vaccine and 2nd dose Varicella are now available with state supplied vaccine, they are **not** school/childcare requirements.

**VAC update:** The April Vaccine Advisory Committee meeting has been cancelled. The next meeting is in July.

**New staff** - The Immunization Program CHILD Profile is excited about the addition of three new staff to the program in the near future:

- a. May 1 -- Jeff Wise will join the Program to replace Vicki Bouvier as the Program's Policy lead
- b. We anticipate completing the hiring process for a new Vaccine Management Consultant by May 14<sup>th</sup>. This position was created to increase staffing for vaccine policy, budget and operations work. A formal announcement will follow upon completion of the hiring process.
- c. CDC is promoting increased effort in focusing on adolescent immunizations and provider work specific to the adolescent population. They have provided additional resources to all states to support this work, and the Immunization Program CHILD Profile is in the process of establishing a new Adolescent Provider Outreach lead. We are in the final steps of the HR paperwork, and a job announcement will come out in the next couple weeks.

**NWIC conference update:**

- d. We are really excited about the conference! It is coming together very well, and we are pleased at the caliber of speakers that will be presenting at the conference. Over 500 people have registered for the conference, many from other states in addition to representation from almost every local health jurisdiction in Washington! The final agenda is up on the website.
- e. If you have any questions as the date nears – contact Michele, Lonnie or Nicole Avelar

**HPV communication activities:****Immunization Program CHILD Profile**

(360)236-3595 toll free 866-397-0337

Internet Address: [www.doh.wa.gov](http://www.doh.wa.gov)

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- f. The Immunization Program CHILD Profile has created a fact sheet for the general public and posted it to the DOH website. The fact sheet includes a number of links to other resources.
- g. There are links on our provider page and on the HPV fact sheet to lots of great information that CDC has put together for providers. The information on the CDC site includes a tip sheet for providers on how to talk about this vaccine with parents.
- h. Media work –
  - i. Expect to see on-going information in the media about HPV vaccine as the Governor initiates her tour of the state to talk about the successes of the legislative session and the budget. Mary Selecky will also be talking about the significant items in the Department of Health budget that stemmed from the legislature, which will naturally include the funding for vaccines in general and specifically mentioning HPV vaccine.
  - ii. The week of May 21<sup>st</sup>, the Department of Health will distribute a news release about the new vaccines.
  - iii. Also week of May 21 - Mary Selecky may also have some specific media events at provider offices (Mary, doctor, and teen getting the shot).
  - iv. We will keep you posted as these events develop and unfold.

**2007 provider agreements:**

- a. 2007 provider agreements were mailed out to LHJs a few weeks ago.
- b. There are some inconsistencies in the provider names and addresses resulting from a transition between databases at DOH. Providers can pencil in the changes needed to the site name or address, or they can fill out a new blank agreement. Please include the PIN number from the top right-hand corner of the agreement.
- c. Provider agreements are due to DOH by June 1, 2007.

**Consolidated contract:**

- a. The consolidated contract was recently amended to extend the deliverable due date for the provider agreements and to increase the allocations to each LHJ, including the addition of a new fund source (VFC/AFIX funds).
- b. LHJ staff are encouraged to visit the DOH Consolidated Contract website for additional updates to the *Washington State Vaccine Federal and State Requirements* and to view the *Allowable Expenses with 317 and VFC FA Operations Funds* matrix referenced in the consolidated contract. The link to this website is <http://www.doh.wa.gov/concon/portal.htm>.
- c. Please contact Tawney Harper (360-236-3525 or [tawney.harper@doh.wa.gov](mailto:tawney.harper@doh.wa.gov)) if you have questions.